

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

PROTECTING OUR VOTE PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17033.57"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="29692.10"/>	<input type="text" value="64107.10"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="46725.67"/>	<input type="text" value="64107.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="35063.63"/>	<input type="text" value="52445.06"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="11662.04"/>	<input type="text" value="11662.04"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="5662.10"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

PROTECTING OUR VOTE PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10000.00	20750.00
(ii) Unitemized	192.10	357.10
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10192.10	21107.10
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	19500.00	43000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	29692.10	64107.10
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	29692.10	64107.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	29692.10	64107.10

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	715.36	18096.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	715.36	18096.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	34348.27	34348.27
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35063.63	52445.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35063.63	52445.06

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	29692.10	64107.10
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29692.10	64107.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	715.36	18096.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	715.36	18096.79

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
PROTECTING OUR VOTE PAC

Full Name (Last, First, Middle Initial)
A. John Rogers

Mailing Address 200 East Randolph Street
Suite 2900

City Chicago State IL Zip Code 60601

FEC ID number of contributing federal political committee. **C**

Name of Employer Ariel Investments Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.4217

Amount of Each Receipt this Period
10000.00

Contribution

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	10000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PROTECTING OUR VOTE PAC

A. AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2012

Transaction ID : SA11C.4210

Amount of Each Receipt this Period
1000.00

Contribution

B. AMERICAN POSTAL WORKERS UNION AFL-CIO

Full Name (Last, First, Middle Initial)
Mailing Address 1300 L ST N W

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C70003322

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2012

Transaction ID : SA11C.4208

Amount of Each Receipt this Period
1000.00

Contribution

C. INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 900 SEVENTH ST, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012

Transaction ID : SA11C.4221

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PROTECTING OUR VOTE PAC

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF LETTER CARRIERS OF UNITED STATES OF AMERICA BRANCH 9 P.A.L.

Mailing Address 11581 ILEX ST NW

City COON RAPIDS State MN Zip Code 55448

FEC ID number of contributing federal political committee. **C** C00114314

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2012

Transaction ID : SA11C.4219

Amount of Each Receipt this Period
 5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
TUNICA-BILOXI INDIAN PAC (TBIPAC)

Mailing Address P.O. BOX 416

City MANSURA State LA Zip Code 71350

FEC ID number of contributing federal political committee. **C** C00339937

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11C.4206

Amount of Each Receipt this Period
 2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Mailing Address 1775 K STREET N.W.

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00002766

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2012

Transaction ID : SA11C.4204

Amount of Each Receipt this Period
 5000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	19500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROTECTING OUR VOTE PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Merchant Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4215

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Christopher Brooks

Mailing Address 1425 Howard Road, SE

City Washington State DC Zip Code 20020

Purpose of Disbursement
Website

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4213

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Political Development Group, LLC

Mailing Address 499 South Capitol Street, SW
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Reimbursement - Food and Beverage

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4202

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROTECTING OUR VOTE PAC

Full Name (Last, First, Middle Initial)

A. Political Development Group, LLC

Mailing Address 499 South Capitol Street, SW
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Reimbursement - Postage

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4198

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
PROTECTING OUR VOTE PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Compliance
Mailing Address 1201 Third Avenue 40th Floor	
City State Zip Code Seattle WA 98101	

Outstanding Balance Beginning This Period <input type="text" value="5662.10"/>	Transaction ID : SD10.4165	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5662.10"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="5662.10"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="5662.10"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="5662.10"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) PROTECTING OUR VOTE PAC	FEC IDENTIFICATION NUMBER ▼ C C00509463
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee CensusChannel LLC		Date MM / DD / YYYY 11 / 01 / 2012
Mailing Address 4410 E Claiborne Square Suite 334		Amount 15000.00
City Hampton	State VA	
Zip Code 23666	Transaction ID : SE.4169	
Purpose of Expenditure Canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>10</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 15000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee CensusChannel LLC		Date MM / DD / YYYY 11 / 05 / 2012
Mailing Address 4410 E Claiborne Square Suite 334		Amount 10000.00
City Hampton	State VA	
Zip Code 23666	Transaction ID : SE.4174	
Purpose of Expenditure Canvassing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: <u>NE</u> <input type="checkbox"/> Senate District: <u>02</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN W JR EWING		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 10000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marcus S. Mason
[Electronically Filed]
Date

Signature **12 / 07 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) PROTECTING OUR VOTE PAC	FEC IDENTIFICATION NUMBER ▼ C C00509463
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SB Strategies, LLC		Date M M M / D D D / Y Y Y Y Y Y 11 / 05 / 2012
Mailing Address 20929 Ventura Blvd Suite 47101		Amount 1487.79
City Woodland Hills	State CA	Zip Code 91364
Purpose of Expenditure Robo Calls	Category/ Type	Transaction ID : SE.4187
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1487.79		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SB Strategies, LLC		Date M M M / D D D / Y Y Y Y Y Y 11 / 05 / 2012
Mailing Address 20929 Ventura Blvd Suite 47101		Amount 964.80
City Woodland Hills	State CA	Zip Code 91364
Purpose of Expenditure Robo Calls	Category/ Type	Transaction ID : SE.4190
Name of Federal Candidate Supported or Opposed by Expenditure: MARK TAKANO		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 41 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 964.80		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2452.59
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marcus S. Mason
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) PROTECTING OUR VOTE PAC	FEC IDENTIFICATION NUMBER ▼ C C00509463
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SB Strategies, LLC		Date MM / DD / YYYY 11 / 05 / 2012
Mailing Address 20929 Ventura Blvd Suite 47101		Amount 2492.91
City Woodland Hills State CA Zip Code 91364	Transaction ID : SE.4192	
Purpose of Expenditure Robo Calls	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN ALEXZANDER HORSFORD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2492.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Unionist Printing		Date MM / DD / YYYY 11 / 05 / 2012
Mailing Address 1309 NW Radial Highway		Amount 925.55
City Omaha State NE Zip Code 68132	Transaction ID : SE.4185	
Purpose of Expenditure Printing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NE <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN W JR EWING		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 10925.55		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3418.46
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	34348.27

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marcus S. Mason

Signature _____ [Electronically Filed] Date MM / DD / YYYY **12 / 07 / 2012**